MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			IND.	EF.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.							
1	1						61						
2		/					62						
3		/					63						
4							64						
6							66						
6		/					66						
7		/					67						
8		/					68						
9		/					69						
10	1	/					60						
11		/					61						
12		/					62						
13		/					63						
14		/					64						
16		/					65						
16	1	/					66						
17		/					67						
18		/					68						
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42							92						
43							93						
44							94						
46							96						
46							96						
47							97						
48							98						
49							99						
60							100						
TOTAL IND.	3						TOTAL IND.						
TOTAL DEP.	17						TOTAL DEP.						
TOTAL	20						TOTAL						